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PATENT APPLICATION FEE DETERMINATION RECORD										ication or 48.001	n or Docket Number			
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY			OR	OTHER T	
FOR		NUMBI	ER FILED		NUMBER EXTRA			RAT	Е	FEE		RATE	FEE	
BASIC FEE (37 CFR I.16(a))								1	375	OR		s_0		
	AL CLAIMS CFR 1.16(c))		22	minı	ıs 20 =	* 2 0			x § 9		18	OR	x <u>\$ 18</u> =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))			8	min	us 3 =	* 5 0		1	x 42 _= 2		210	OR	x 84 =	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) 0							+ 140	= -	0	OR	+ 280 =	0		
* If the difference in column 1 is less then zero, enter "0" in column 2									ТОТА	L	603	OR	TOTAL	0
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								_	SMAL	L EN	ΓΙΤΥ	OR	OTHER T	
AMENDMENT A		CLAII REMAII AFTE AMENDI	NING R		NU PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	* Minus			** 20		= 0		x \$ <u>9</u>	_ 0		OR	x \$ <u>18</u> =	0
	Independent (37 CFR 1.16(b))	* Minus			*** 3		= 0		x <u>42</u>	= 0		OR OR	x <u>84</u> =	0
,	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (3						CFR 1.16(d)) + 140			= 0		OR	+ 280 =	0
(Column 1) (Column 2) (Column 3)							AI	TOTAI DDIT. FEE	_ , ,		OR A	TOTAL DDIT. FEE	0	
AMENDMENT B		CLAII REMAII AFTE AMENDI	NING R		NU PREV	HEST MBER HOUSLY D FOR	PRESENT EXTRA		RATE	T	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*		Minus	**		=		x \$ <u> </u> 9=	= 0			x \$ <u>18</u> =	0
	Independent (37 CFR 1.16(b))	*		Minus	***		=	x _42		_ 0		OR OR	x <u>84</u> =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+ 140	= 0		OR	+ _280_=	0
(Column 1) (Column 2) (Column 3)								A	TOTA DDIT. FE]	OR Al	TOTAL DDIT. FEE	0
AMENDMENT C		CLAIN REMAIN AFTE AMENDI	NING R		NU: PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA	1 1 10		TI	ADDI- ONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(e))	*		Minus	**		=		x \$ <u>9</u> = x <u>42</u> =			OR OR	x \$ <u>18</u> =	0
	Independent (37 CFR 1.16(b))	*		Minus	***		=						x <u>84</u> =	0
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))								+ 140	= 0		OR	+ 280 =	0
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.														

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

1.6006

(Column 1)						mn 2\		SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS					(Column 2)					OR I I			
			1		7			ATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BAS	IC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			21 min	us 20=	* 4		X	\$ 9=	4	OR	X\$18=		
	EPENDENT CL		- : :	nus 3 =	<u> </u>		Х	42=	もし	OR	X84=		
MU	LTIPLE DEPEN	IDENT CLAIM PI	RESENT				+1	40=		OR	+280=		
* If	the difference	in column 1 is	less than ze	ro, enter	r "0" in c	olumn 2	TC	TAL	5-14	OR	TOTAL		
	С	LAIMS AS A	AMENDED - PART II					,		OTHER THAN			
_		(Column 1)		(Colur				IALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	R	RATE TIONAL FEE			RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	* NTATION OF M	Minus ***		T CL AUA	=	X	42=		OR	X84=	1	
	FIRST PRESE	NIAHON OF M	OLTIPLE DEF	ZENDEN	CLAIIVI	<u> </u>	+1	40=		OR	+280=		
								TOTAL IT. FEE		OR	TOTAL ADDIT, FEE		
	(Column 1) (Column 2) (Column 3)										ADDIT, FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	HEST IBER OUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	42=		OR	X84=		
Ľ	FIRST PRESE	NTATION OF M	PENDENT	F CLAIM			40=		OR	+280=			
											TOTAL		
							ADD	TOTAL IT. FEE		OR	ADDIT. FEE		
		(Column 1) CLAIMS		(Colui		(Column 3)	_						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUM PREVI	IBER OUSLY FOR	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	42=		OR	X84=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1	.000		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													